

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000001964 (4)

1. Corporation Name
FOSTERING FAMILIES OF COLLIER COUNTY AND BONITA SPRINGS, INC.

Principal Place of Business 715 WILLOWHEAD DR. NAPLES FL 34103	Mailing Address 715 WILLOWHEAD DR. NAPLES FL 34103-3575
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2. Principal Place of Business 21 Same		2a. Mailing Address 26 Same		3. Date Incorporated or Qualified 04/20/1995	3a. Date of Last Report 08/27/1996
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number APPLIED FOR 65-0043990	
23 City & State		28 City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip		29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Country		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent MONAHAN, ANGELA 715 WILLOWHEAD DRIVE NAPLES FL 34103				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Angela Monahan (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President/Dir <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONAHAN, ANGELA	1.2 NAME	Steve Bellman
STREET ADDRESS	715 WILLOWHEAD DRIVE	1.3 STREET ADDRESS	1711 17th St SW
CITY-ST-ZIP	NAPLES FL 34103	1.4 CITY-ST-ZIP	Naples FL 34117
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Vice-President/Dir <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELTER, VAL	2.2 NAME	Ann Byrd
STREET ADDRESS	821 18TH STREET NE	2.3 STREET ADDRESS	506 Palm Ridge Drive
CITY-ST-ZIP	NAPLES FL 33964	2.4 CITY-ST-ZIP	Immokalee, FL 34142
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Treasurer/Dir <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAVENDER, MARTHA	3.2 NAME	Angela Monahan
STREET ADDRESS	34780 25TH AVE., S.W.	3.3 STREET ADDRESS	715 Willowhead Dr
CITY-ST-ZIP	NAPLES FL 33964	3.4 CITY-ST-ZIP	Naples FL 34103
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)